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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			Docket Number 850103.40301	
	In re Application of Michael	T. Kelly et al.		
	Application Number 09/043	Application Number 09/043,813		
	For CYCLIC DECAPEPTID	For CYCLIC DECAPEPTIDE ANTIBIOTICS		
	Group Art Unit 1653	Examiner Anish Gupta		
This is a reques	under the provisions of 37 CFR 1.1		period for filing a	

The requested extension and appropriate non-small-entity fee are as follows (check time period desired): One month (37 CFR 1 17/a)(1)\

		\$			
	Two months (37 CFR 1.17(a)(2))	\$			
	Three months (37 CFR 1.17(a)(3))	\$ <u>920</u>			
	Four months (37 CFR 1.17(a)(4))	\$			
	Five months (37 CFR 1.17(a)(5))	\$			
X	Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown				
5	above is reduced by one-half, and the resulting fee is: \$ 460.				
X	A check in the amount of the fee is enclosed.				
Ц	Payment by credit card. Form PTO-2038 is attached.				
	The Commissioner has already been authorized to charge fees in this				
	application to a Deposit Account.				
	The Commissioner is hereby authorized to charge any fees which may be required				
	to Deposit Account Number 19-1090.	required			
X	The Commissioner is hereby authorized to charge any deficiency,				
_	or credit any overpayment, to Deposit Account Number 19-1090.				
	er stock any overpayment, to beposit Account Number 19-1090.				
I am the	applicant/inventor.				
	assignee of record of the entire interest. See 37 CFR 3.7				
	Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).				
	attorney or agent of record.				
	attorney or agent under 37 CFR 1.34(a).				

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Registration number if acting under 37 CFR 1.34(a).

October 4,	2002

Date

Signature

David W. Parker

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, 323621v1.doc [04-18-01]